PATENT APPLICATION FEE DETERMINATION RECO									Application or Docket Number					
Effective October 1, 2001									1	W	<u>ר'כ</u>	757		
		CLAIMS AS	S FILED - PART I (Column 1) (Column 1)			SMAL mn 2) TYPE			EN1	rity	OR	OTHER SMALL		
TOTAL CLAIMS (7								RATE		FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS					. 0			X\$ 9:	=		OR	X\$18=		
INDEPENDENT CLAIMS			2 minus 3 = * C			9		X42=	,		OR	X84≈		
MU	LTIPLE DEPEN	DENT CLAIM PR	RESENT / □					+140			OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTA	_		OR	TOTAL	742	
CLAIMS AS AMENDED - PART II									L		9	OTHER	THAN	
_		(Column 1)	(Column 2)			(Column 3)	•	SMAL	LE	NTITY	OR	SMALL	ENTITY	
ENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	ŀ	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Š	Total	. 17	Minus	**2	0	±		X\$ 9=			OR	X\$18=		
AMENDMENT	Independent	. 2	Minus	24A -	3	-		X42=			OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=	= .		OR	+280=		
	8/16/84	(A)					1	TOT			OR	TOTAL ADDIT, FEE		
	OF DE	(Column 1)_		(Colu	mn 2)	(Column 3)					•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
AMENOMENT B		CLAIMS REMAINING AFTER AMENDMENT				PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.17	Minus	** <	20	=		X\$ 9:	+		OR	X\$18=		
	Independent	NTATION OF MI	Minus	ENDEN	<u>3</u>	<u> -</u>		X42=			OR	X84=		
٢	FIRST PRESE	NIATION OF MIC	JETIFEE DEF	CHOCK	CEARIN			+140=			OR	+280=		
							i	TOT.			OR	TOTAL ADDIT. FEE		
			ADDII. 1											
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		PREVI		PRESENT EXTRA		RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
Š	Total	*	Minus	**		2		X\$ 9=			OR	X\$1B=		
ME	Independent	*	Minus	***		-		X42=			OR	X84=		
الــُــ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							4.44	+					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+280= TOTAL		
* If the entry in column 1 is less than the entry in column 2, write 0 in column 2. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													<u> </u>	
	The *Highest Nun	nber Previously Pa	id For (Total or	Independ	lent) is the	highest numb	er fox	ind in the	appr	opriate bo	x in co	dumn 1.		
FOR	A PTO-875 (Rev. 8,	(01)			-		Pat	ent and Tra	dema	rk Office, U	.S. DE	PARTMENT OF	COMMERCE	